

WHAT IS THIS PROGRAM FOR?

This program was created by the Wisconsin Legislature to assure that foster, treatment foster and family-operated group home parents are reimbursed for damages or loss they might experience that are caused by acts or omissions of county or state foster children placed in their care and that are not covered by private insurance policies.

For purposes of this program, "group home" used in this brochure means "family-operated group home" and "foster parent" includes "treatment foster parent."

WHO IS ELIGIBLE?

Any foster or group home parent licensed in the State of Wisconsin is eligible to file a claim under this program when the child is in custody of the county or state. However, this program is the "insurer of last resort" and should be used only when a private insurer will not cover any damages or loss.

WHAT KINDS OF DAMAGE OR LOSS ARE COVERED?

Foster and group home parents are required to have homeowner's or renter's insurance (unless waived by the licensing agency) that covers negligent acts committed by foster children that result in bodily injury or property loss to the foster home resident's personal property, insurance on buildings on the property, coverage on vehicles, boats, snowmobiles, ATV's, etc.

Therefore, this program is designed to cover injury or damage caused by the foster child to foster and group home parents. In some cases, private insurers will not cover damage or loss. In addition, this program may cover injury or damage caused by foster and group home parents to the foster child or for acts by foster and group home parents for which they are sued by the child's parent. The State Foster Parent Insurance does not cover 3rd party claims, unless the foster parent is sued by the 3rd party.

It is recommended that all valuables such as jewelry, cash, keys, antiques and vehicles be safeguarded or protected from loss or theft.

WHEN MUST I FILE MY CLAIM?

If the damage or loss was suffered by foster or group home parents, the claim must be filed within 90 days after the damage or loss occurs or is discovered.

If the foster child suffered the damage or loss, the claim must be filed within 90 days after the foster or group home parents learn that a legal action has been commenced against them.

Regardless of any other circumstances (e.g., waiting to hear from private insurers, the child going to court for a possible restitution order), the foster or group home parents should file a claim with the social worker as soon as possible after the damage or loss occurs or is discovered. If restitution is granted by the court, the Department of Health and Family Services (DHFS) shall be notified and restitution monies must be returned up to the amount of the paid claim.

HOW DO I FILE A CLAIM?

In order to file a claim, the foster or group home parent should ask the agency that placed the child for a claim form (form CFS-116). The form should be filled out completely with as much detail as possible. The completed form, with any documentation, should be returned to the agency that placed the child. A W-9 form, also known as Employee Identification Form, is to be filled out by the parent and submitted with the CFS-116.

The foster care agency will complete another form (form CFS-117) and may request additional information and/or permission to view the damage. The agency will then forward all of the materials to the Department of Health and Family Services for review. The CFS-2198, Foster Parent Insurance Program Checklist, will give additional information on filing the claim. Your worker or placing agency will need to determine the IV-E federal eligibility of the child.

WHAT INFORMATION SHOULD I SUBMIT WITH THE CLAIM?

The more documentation you have, the better. It is recommended that you photograph or videotape your home and contents now. When damage or loss occurs, you can then photograph the damage and submit all of the photographs for comparison. You must submit written estimates on printed business forms or letterhead for repairs or replacement costs, receipts for replacement items, written insurance company estimates of damages, police reports, fire reports, or other documentation that indicates what happened, what item is damaged or lost, and what the value of the damages or loss is. If possible, retain any damaged items until your claim has been approved. The Department cannot pay claims if there is no documentation regarding the loss or damage.

You will also need to submit proof that your private insurance will not cover any of the damages or loss by sending a current copy of a letter from your insurance agent.

In addition, the Department is only able to reimburse foster parents for parts or section of a set of items. For example, if a couch is damaged beyond repair and it is part of a set of a love section and chairs, we are only able to reimburse for the couch that is damaged.

IS THERE A DEDUCTIBLE?

The Department is required to deduct \$100 for all claims submitted within the same State Fiscal Year (July 1 through June 30). If your private insurer pays part of the claim and charges a deductible, the amount of that deductible will be subtracted from the \$100.

If your claim is for less than \$100, you should file it with your social worker in case you have another claim within the same fiscal year. For example, if you have a claim in August for \$50 and another in January for \$150, the \$100 would be deducted from the total of both claims.

HOW LONG MUST I WAIT TO RECEIVE MY CLAIM CHECK?

Claims are reviewed quarterly in January, April, July, and October. It takes about six weeks from the time your claim is approved for you to receive a claim check.

If your claim is incomplete or does not include adequate documentation, the processing time will be increased.

WHERE CAN I GET MORE INFORMATION?

For additional information, contact your social worker for the child who is placed in your foster or group home.

For each quarter, if the total claims exceed the state budget of \$15,000, plus applicable federal funds, the reimbursement will be prorated. If any funds are left at the end of the state fiscal year, these funds will be prorated to parents not receiving full reimbursement.

DATA SHEET

Homeowner's or Renter's Insurance

Company _____

Policy No. _____

Agent _____

Telephone No. _____

Fax/e-mail _____

Vehicle Liability Insurance

Company _____

Policy No. _____

Agent _____

Telephone No. _____

Fax/e-mail _____

Child Placing Agency

- Child's Name _____

Placing Agency _____

Contact Person _____

Telephone No. _____

Fax/e-mail _____

- Child's Name _____

Placing Agency _____

Contact Person _____

Telephone No. _____

Fax/e-mail _____

Foster Parent Insurance Claims
DHFS/DCFS
P. O. Box 8916
Madison, WI 53708-8916

THE FOSTER/ TREATMENT FOSTER AND FAMILY-OPERATED GROUP HOME INSURANCE PROGRAM



State of Wisconsin
Department of Health & Family Services
Division of Children and Family Services